## **E DETERMINATION RECORD** Effective october 1, 2001

Application or Docket Number

		CLAIMS A	S FILED (Colum			ımn 2)		SMALL E	YIIIN	OR		THAN
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		]	BASIC FE		OR	BASIC FEE	890
TOTAL CHARGEABLE CLAIMS			/4 minus 20=		*		1	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS				ninus 3 =				X42=		OR	X84=	114504
M	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero,					"0" in d	column 2		TOTAL		OR	TOTAL	140
/	CLAIMS AS AMENDED - PART II									<b>.</b>	OTHER	
_	$(C_{\lambda} \cup I_{\lambda})$	(Column 1)	7	(Colur		(Column 3	<b>)</b>	SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID-	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	./2	Minus	70	0	=		X\$ 9=	, S.	OR	X\$18=	
AME	Independent	· 52	Minus	***	<u> </u>	= -	┛	X42=	3.	OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						J	+140=	· .	OR	+280=	•
	the second of th							TOTAL	4.5	1	TOTAL	
	** *	(Column 1)	No.	(Colun	nn 21	(Column 3)		ADDIT. FEE			ADOIT. FEE	and Security
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	EST JER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	·d	Minus	**	10	=		X\$ 9=		OR	X\$18=	
	Independent	• 2	Minus	*** 5	2	=	]	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT	GRAIM		J	140			.000	
			• •	1	<i>}</i> .			+140=		OR	+280==	
	· · · · · · ·						. , .	ODIT. FEE L	140.000 · 1	OR ,	ODOT. FEE	
_		(Column 1) CLAIMS	27.0	(Colum		(Column 3)	1 -					
AMENDWEN! C		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE	ADDI- : TIONAL :FEE		RATE	ADDI- TIONAL FEE
	Total		Min <b>us</b>	##		=,	I t	X\$ 9=	THEE	OR	X\$18=	2.
	Independent	*	Minus	***		=	]	X42=		l	X84=	** 11 J. 15 PM
۱	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		]  -	^74₽		OR	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
										OR	+280=	
m H	If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid F "LINLTHIS SPACE is less than 20, enter "20."  If the "Highest Number Pr viously Paid For" IN THIS SPACE is I se than 3, enter "3."									OR A	TOTAL DOIT, FEE	
_		nber Pr viously Paid ber Previously Paid					r four	nd in the appr	opriate box	-		